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CONFIRMATION NO. 1645

<b>SERIAL NUMBER</b> 10/781,860	<b>FILING OR 371(c) DATE</b> 02/20/2004 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3732	<b>ATTORNEY DOCKET NO.</b> P67315US1
<b>APPLICANTS</b> Gregory James Roger, New South Wales, AUSTRALIA;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/926,684 03/04/2002 PAT 6,712,857 <i>7L</i> <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/12/2004 <b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature <i>[Initials]</i>		<b>STATE OR COUNTRY</b> AUSTRALIA	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 32
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> 20583				
<b>TITLE</b> Acetabular component of total hip replacement assembly				
<b>FILING FEE RECEIVED</b> 558	<b>FEES: Authority has been given in Paper</b> No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	